

INSR/10

INS. CASE OWNER:

Tahme Tay | CC /EQI1802 *0504, #1 kbb^{S2}*

LKK:

IDAC:

Surveyor:

KAWM

DOI:

ASSIGNMENT

12/11/18

Date / Time:

11/11/18

Registered in Merimen:

Pre-assign / CCU / FTE



Insured Vehicle No. :

FBIH 5031L

Claim No. :

Name of Insured :

BAW MOCKHIN CO N/L

Policy No. :

MMMPA18-00007

Insured Tel No. :

HP:

Make / Model :

YAMAHA

Excess Sec II :SS

D.O.A :

11/11/18

Place of Accident :

PIE TUNG MANGI

Is driver the owner? (YES / NO)

(YES / NO)

Nature of Accident :

If NO, Driver Name / Age :

MUHAMMAD SOLEHIN ASHRAF BIN

OI GIA REPORT: YES / NO : TP GIA REPORT: YES / NO

Driver Tel No. :

(V/L: YES / NO)

Insured Liability :

% Final ? Yes / No

SM 38177

ADMMW



INSRS:
WSP:
Tel:
Liability:
RMKS:

WSP



INSRS:
WSP:
Tel:
Liability:
RMKS:



INSRS:
WSP:
Tel:
Liability:
RMKS:



INSRS:
WSP:
Tel:
Liability:
RMKS:

Date/ Time	STAGE	DATE / PIC
<i>10/11/18</i> <i>W/C</i>	Non-Reporting ltr (1st): Non-Reporting ltr (2nd): Non-Reporting ltr (Final): Notification ltr (if non-pickup): Call OI: After call ltr to OI:	
<i>8/11/18</i>	Documentation Check List: Handler Typist	
	Notification ltr (if non-pickup)	<input type="checkbox"/>
	After call ltr to OI:	<input type="checkbox"/>
	Authorisation To Act:	<input type="checkbox"/>
	Release Voucher:	<input type="checkbox"/>
	Final Repair Bill:	<input type="checkbox"/>
	Car Rental Invoice:	<input type="checkbox"/>
	Towing Invoice	<input type="checkbox"/>
	LTA / GIA :	<input type="checkbox"/>
	Medical Bill:	<input type="checkbox"/>
	PIR:	<input type="checkbox"/>
	Mandate/Reject Instruction:	<input type="checkbox"/>
	LOD	<input type="checkbox"/>
	Payment Breakdown Form:	<input type="checkbox"/>
	Post-Repair Photos:	<input type="checkbox"/>
	Others:	<input type="checkbox"/>

PRELIMINARY ADVICE Date/Time: _____ Sent By: _____

FINALIZATION Date/Time: _____ Confirm with: _____ Confirm by: _____
 Repair Cost: S\$ _____ (_____ days) Reduction: _____ % Email Call

FINAL SETTLEMENT Date/Time: _____ Confirm with: _____ Email Call
 Final Liability: % (Agreed / Assessed) BOLA S/N No. : _____ If NO or B 28, Ass. Lia : _____
 Repair Cost: S\$ _____
 Loss of Rental (LOR): S\$ _____ (_____ days)
 Loss of Use (LOU): S\$ _____ (\$ x _____ days)
 Loss of Income (LOI): S\$ _____ (\$ x _____ days)
 LOR only LOU only LOR + LOU LOR + LO [Tick only one]
 GIA/LTA Search: S\$ _____
 Medical: S\$ _____
 Disbursement: S\$ _____ (e.g. Tow/ Independent)
 Legal Cost: S\$ _____
Total: S\$ _____ **Global Sum S\$:** _____
 1) Claim status: Normal/Reject/Private Settle *(up)*
 2) Report Format: *TP*
 3) Survey fee: *\$160.00*

FINAL PAYMENT Date/Time: _____ Confirm with: _____ Email Call
 Payee 1: S\$ _____ Name 1: _____
 Payee 2: (Strike if N.A.) S\$ _____ Name 2: _____
 Payee 3: (Strike if N.A.) S\$ _____ Name 3: _____

Surveyor: Kevin

REF: _____

ASSIGNMENT

From: _____ Date: _____

Estimated Cost: _____

OD / TP / WS / TP RES / OD RES / EVA / INV / MV

To Inspected Vehicle No: _____

at Workshop m/s _____

of _____

Insured: _____

Policy No: _____

Claims No: _____

Sum Insured: _____ Excess: _____

(Client's Record)

Make of Veh: _____

(Policy Condition)

Remark: The veh had commenced its repair at the time of inspection.

N/S	O/S

Bal. or Market Value: _____

IDAC Accident Rpt: _____ Consistent?: Yes or No

GIA / PR Seen: _____ Consistent?: Yes or No

Est. Repars: 2 days Res.: Yes or No

Lum Sum: _____ % 3 Val.: Yes or No

CA / REV / REP. / 24 HRS

Date: _____ Person Contacted: _____ Vehicle: IN / OUT

Veh No: SH 7877Z Yr Regn: 20 Dec, 2017

Type: M. Car / M. Cycle / Bus / Van / Lorry / T / Prime Mover /

Truck / Trailer or _____

Make: Hyundai c.c. 1685

Colour: Blue A/C: Insured / Std / NI / NA

Sp. Reading: 13450 T/Radio: Insured / Std / NI / NA

Eng No: _____

C/No: KMHLB414M44099367

Gen. Cond: Good / Poor / Burnt

Steering: In order / Jammed / Leaked / Burnt or _____

Brake: In order / Jammed / Leaked / Burnt or _____

Modi: Nil / S/Rim / STD Rim or _____

Tyre Size: F: 205/60R16

R: _____

BS / DUN / EXNOVA / GY / FS / LIZA / MIC / OHTSU / PIR / SUMI /

TOYO / YOKO or Haraka

Front _____ Rear _____

R/Bal. 7 mm R/Bal. 7 mm

L/Bal. 7 mm L/Bal. 7 mm

D.O.A. 9/11/18 D.O.I. 12/11/18

Survey held at CDGE (Loyang)

Des. of Damages: Frt / Rear / O/S / N/S / U/C / Rooftop or

n/s Body

The U/C / Chassis frame / Body Structure affected due to collision.

Date / Time	Action / Instruction
	PIP \$ 2280.12 (Red \$ 40) 29A. EQ PIP

Date/Time, File Pass to? : Prel. Report

1) _____ : Final Report

Date/Time, File Return to?

2) _____

Report Format: _____

Lump Sum / I.B.I.: (\$ _____)

Days Of Repair: _____

Resurvey No. of Trip: _____

Add Fee: : Site Insp (\$ _____)

: Interview (\$ _____)

: Tech. Invs (\$ _____)

: Weekend (\$ _____)

Survey Fee:	
Transportation:	
\$ + RS \$	
Photos	
Others	
TOTAL	



LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Affiliated to Federation Internationale Des Experts En Automobile

EQ INSURANCE COMPANY LTD

Ref : CC3/EQI18020504/K1hb3

5 MAXWELL ROAD
#17-00 TOWER BLOCK
MND COMPLEXSINGAPORE 069110

Date : 13-11-2018



Code : EQI

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	FBH 5031L	Veh. Inspected	SH 7877Z
Policy No.		Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From		Assign Date	13/11/2018

2. Vehicle Particulars & Condition

Make & Model		c.c	0
Engine No.	HIDDEN	Year of Reg.	
Chassis No.		Colour	
Odometer	-	Steering	
Brakes		Modification	
General			

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre			mm
L/H Front Tyre			mm
R/H Rear Tyre			mm
L/H Rear Tyre			mm

4. Description of Damages

--

5. General Information

Accident Date	09/11/2018	Inspection Date	12/11/2018
Survey held at	COMFORTDELGRO ENGINEERING PTE LTD 59 LOYANG DRIVE SINGAPORE 508969		

5a. Remarks

A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS. B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.
--

W

Date/Time: 09.11.2018 17:44 Page : 1

member of COMFORIDELGRO

Team: ARC Repair TP(CLSO)1 **JOB CARD** Sales Order: JC NO.: 305236888

OMER IS COMFORT TRANSPORTATION PTE LTD 7010045 OMER NO. 383 SIN MING DRIVE IESS Singapore SINGAPORE 575717 65508755 (R) (O) (P)	REGN NO.: SH 7877Z	MILEAGE
	MAKE: HYUNDAI	FUEL E.....1/2.....F
	MODEL I-40	DATE/TIME IN 09.11.2018 12:15
	YR OF MANU 20.12.2017	TARGET DATE
	CHASSIS CODE KMHLB41UMHU099367	COMPLETION DATE/TIME:

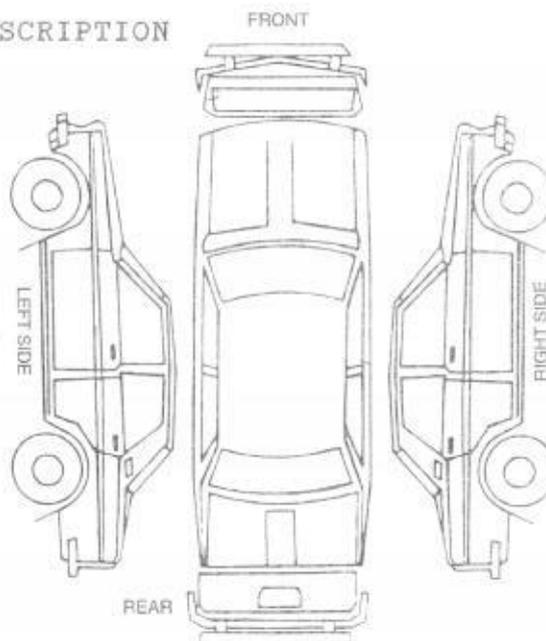
DUNT CARD NO.

JOB DESCRIPTION

Accident Date: 09.11.2018
NATURE: 3P 09.11.18

S/NO LABOR CODE

DESCRIPTION



WORKED & PASSED OUT BY: _____

SERVICE ADVISOR

CUSTOMER'S SIGNATURE

Workshop Slip

Exit Pass

No.: SH 7877Z LIMTS

Vehicle No.: SH 7877Z

Signature of Service Advisor

Signature/Date

Name of Service Advisor

Date

Returned to Service Reception upon collection

To be kept by Security Guard



Auto
Consultants
Pte Ltd

Company Registration No. 199607198R

51 UBI AVE 1, #02-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

Your ref: TBA
Our ref: CC3/EQI18020504/K1hb3

Date: 13.11.2018

The Motor Claims Department
M/s EQ INSURANCE COMPANY LTD

PRELIMINARY ADVICE OF VEHICLE NO.

SH7877Z

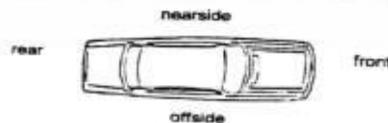
We refer to the above matter.

Please be informed that we had conducted the inspection of the above mentioned vehicle on 12.11.2018 at the premises of M/s ComfortDelGro Engineering Pte Ltd and have the following to report:-

Workshop Estimate Amount	: S\$	2,320.12
Revised Estimate Amount	: S\$	2,280.12
"Check" Items Amount	: S\$	-
Market Value	: S\$	-
LTA Reimbursement Value	: S\$	-
Nett Value	: S\$	-

Description of Damage:

The vehicle sustained damages at the N/S Body



Comments/Present Status:

Damages Consistent

Estimated normal period for repairs: 2.0 days

Yours faithfully,

KALVIN ANG
Licensed Appraiser

**COMFORTDELGRO
ENGINEERING**

Our Job Ref No : 305236888
Date : 14/11/18

ComfortDelGro Engineering Pte Ltd
59 Loyang Drive Singapore 508969
Fax: 6546 8156

FINALIZATION FORM

To : LKK Fax : _____
Attn : KALVIN ANG
Vehicle Reg No. : SH 7877Z Date of Accident : 09-Nov-18

The survey and estimates of the repairs of the above-mentioned vehicle are as follows:-

1. The repair job shall bill to: EQ INS --- FBH5031L
2. The finalized amount shall be:

(a) Spare Parts after List discount	\$1,880.12
(b) Labour Charges	\$400.00
Total for Part-By-Part Repair Cost	\$2,280.12
(c) Lumpsum Repair (if applicable)	
Total for Lumpsum repair cost after Less: <u>20%</u>	
Final Lumpsum Repair cost	

3. Estimated normal period for repairs: 2 working days.
4. **We shall treat the above amount as Correct and Confirmed if there is no reply from you within 7 working days**
5. Thank you for your assistance.

We confirm the estimates and finalized amount

Signature : 
Name : LIM T S
Tel : 62148398
Fax : 65468156

Signature 
Name : KALVIN
Date : 14/11/18

For Official Use Only

Item	Amount	Document Attached Yes or No	Confirm By (Signature)	Remarks
1. Rental Rate P/Day		YES		
2. Loss of Income Paid		NO		
3. Survey Fees	-----			
4. LTA Search Fee	\$7.49			
5. Medical Fees (on behalf of driver, if applicable)				
6. Overrun				

Remarks:

COMFORTDELGRO ENGINEERING PTE LTD

Date: 13.11.2018

REPAIR ESTIMATE

Time: 16:11:11

Page: 1

COMPANY : THIRD PARTY'S CLAIMS (CAS)
CUSTOMER: 7010045
ADDRESS : COMFORT TRANSPORTATION PTE LTD
383 SIN MING DRIVE
SINGAPORE SINGAPORE 575717
65508755

JOB NO : 305236888
REGN NO : SH 7877Z
MILEAGE : 0000000000
MAKE : HYUNDAI
MODEL : I-40
DATE OF REGN : 20.12.2017
DATE/TIME IN : 09.11.2018 12:15
ACCIDENT DATE : 09.11.2018

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

0001 04-01-0103-0593-G FRT DOOR LH 1 2,256.40 20.00 1,805.12

0002 28-01-0103-0003-A FRT DR COMFORTDELGRO LH 1 75.00 75.00

SUB-TOTAL : 1,880.12

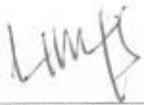
JOB NATURE

0000 L PANEL BEATING 200.00

0001 23-502 SPRAYPAINT ON AFFECTED AREA 200.00

SUB-TOTAL : 400.00

TOTAL : 2,280.12


MVA NAME & SIGNATURE

DATE :

SURVEYOR NAME & SIGNATURE

DATE :

AUTHORISED : YES / NO

COMFORTDELGRO ENGINEERING PTE LTD

Date: 10.11.2018

REPAIR ESTIMATE

Time: 08:45:39

Page: 1

EQ - (P/P)
LKK - Katrina

(Sat) IS

COMPANY : THIRD PARTY'S CLAIMS (CAS)
CUSTOMER: 7010045
ADDRESS : COMFORT TRANSPORTATION PTE LTD
383 SIN MING DRIVE
SINGAPORE SINGAPORE 575717
65508755

JOB NO : 305236888
REGN NO : SH 7877Z
MILEAGE : 0000000000
MAKE : HYUNDAI
MODEL : I-40
DATE OF REGN : 20.12.2017
DATE/TIME IN : 09.11.2018 12:15
ACCIDENT DATE : 09.11.2018

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

0001 04-01-0103-0593-G FRT DOOR LH 1 2,256.40 20.00 1,805.12

0002 28-01-0103-0003-A FRT DR COMFORTDELGRO LH 1 75.00 75.00

SUB-TOTAL : 1,880.12

JOB NATURE

0000 L PANEL BEATING

~~220.00~~ 200

0001 23-502 SPRAYPAINT ON AFFECTED AREA

~~220.00~~ 250

SUB-TOTAL : 440.00

TOTAL : 2,320.12

Lim J

MVA NAME & SIGNATURE

DATE :

SURVEYOR NAME & SIGNATURE

DATE :

Katrina LKK
12/11/18
2 Dgs
P/P
Before Part photo

AUTHORISED : YES / NO

LKK Auto Compensation hereby notify the Rep/ter of the following:

- To resurvey damaged parts during resurvey
- To display damaged parts during resurvey
- Parts prices are subject to market fluctuation
- Third party survey is conducted on 'no prejudice' basis
- No financial documents are required and is subject to law of the relevant insurance company

Acknowledged by Rep/ter
Signature:
Date:

COMFORTDELGRO ENGINEERING PTE LTD

Date: 10.11.2018

REPAIR ESTIMATE

Time: 08:45:39

Page: 1

EQ - (P/P)
LKK - kalvin

(Sat) TS

COMPANY : THIRD PARTY'S CLAIMS (CAS)
CUSTOMER: 7010045
ADDRESS : COMFORT TRANSPORTATION PTE LTD
383 SIN MING DRIVE
SINGAPORE SINGAPORE 575717
65508755

JOB NO : 305236888
REGN NO : SH 7877Z
MILEAGE : 000000000
MAKE : HYUNDAI
MODEL : I-40
DATE OF REGN : 20.12.2017
DATE/TIME IN : 09.11.2018 12:15
ACCIDENT DATE : 09.11.2018

JOB / PARTS DESCRIPTION

QTY IND UNIT-PRICE DISC% AMOUNT

PART REQUISITION

0001 04-01-0103-0593-G FRT DOOR LH 1 2,256.40 20.00 1,805.12

0002 28-01-0103-0003-A FRT DR COMFORTDELGRO LH 1 75.00 75.00

SUB-TOTAL : 1,880.12

JOB NATURE

0000 L PANEL BEATING

~~220.00~~ 200

0001 23-502 SPRAYPAINT ON AFFECTED AREA

~~220.00~~ 200

SUB-TOTAL : 440.00

TOTAL : 2,320.12

Lmf

MVA NAME & SIGNATURE
DATE :

AUTHORISED : YES / NO
SURVEYOR NAME & SIGNATURE
DATE :

Kalvin 10/11/18
12/11/18 1035hr
2 yrs
P/P
Before Paint photo

LKK Auto Consultants hence notify the Repairer of the following:
• To resurvey before/after spray painting
• To display damaged part(s) during resurvey
• Parts prices are subject to confirmation
• Third party survey is on a "Without Prejudice" basis
• No illegal modification(s) is allowed
• Supplementary item(s) must be resurveyed and is subject to final approval from Insurance Company
Acknowledged by Repairer
Signature:
Date:

Shu Pei (LKKAuto)

From: Justin Wong <justin.wong@eqinsurance.com.sg>
Sent: Friday, 16 November 2018 9:51 AM
To: Vic (LKKAuto)
Cc: Admin A; Shu Pei (LKKAuto)
Subject: RE: Direct Settlement - Accident Involving FBH5031L (OI : EQI - TBA) AND SH7877Z (TP : LKK REF - CC3/EQI18020504/K1hb3) on 09.11.2018
Attachments: EQIC-MARS00002949-FBH5031L-GIA.PDF

Dear Vic,

Please be informed that OI reported no contact with SH7877Z.

Kindly obtain video evidence on accident to clear liability.

Regards,
Justin Wong
Executive | Claims



EQ Insurance Company Limited
5 Maxwell Road #17-00 Tower Block MND Complex Singapore 069110
did 65 6496 9115 | tel 65 6223 9433 ext 115 | fax 65 6223 4190
www.eqinsurance.com.sg



Privileged/Confidential information may be contained in this message. If you are not the intended recipient, please notify the sender.

From: Justin Wong
Sent: Thursday, November 15, 2018 10:10 AM
To: 'Shu Pei (LKKAuto)' <shupeil@lkkauto.com>
Cc: Admin A <admin-a@lkkauto.com>; Vic (LKKAuto) <vicalpeh@lkkauto.com>
Subject: RE: Direct Settlement - Accident Involving FBH5031L (OI : EQI - TBA) AND SH7877Z (TP : LKK REF - CC3/EQI18020504/K1hb3) on 09.11.2018

Dear Shu Pei,

Please note that OI non-reporting.

Regards,
Justin Wong
Executive | Claims



EQ Insurance Company Limited

5 Maxwell Road #17-00 Tower Block MND Complex Singapore 069110
did 65 6496 9115 | tel 65 6223 9433 ext 115 | fax 65 6223 4190
www.eqinsurance.com.sg



Privileged/Confidential information may be contained in this message. If you are not the intended recipient, please notify the sender.

From: Shu Pei (LKKAuto) [<mailto:shupe@lkkauto.com>]
Sent: Wednesday, November 14, 2018 9:13 AM
To: Justin Wong <justin.wong@eqinsurance.com.sg>
Cc: Admin A <admin-a@lkkauto.com>; Vic (LKKAuto) <vicalpeh@lkkauto.com>
Subject: Direct Settlement - Accident Involving FBH5031L (OI : EQI - TBA) AND SH7877Z (TP : LKK REF - CC3/EQI18020504/K1hb3) on 09.11.2018

WITHOUT PREJUDICE

Dear Justin,

We refer to the above matter.

We have inspected TP vehicle SH 7877Z at M/s ComfortDelGro Engineering Pte Ltd – Loyang on a WP basis and TP repairer proposed for a direct settlement.

Enclosed for your perusal is:

- TP's GIA report
- Estimated cost of repair
- Preliminary advice

Meanwhile, kindly let us have a copy of your insured's GIA report for our necessary action.

Kindly take note that the case handler in-charge is Vic and he can be contacted at DID: 6841 2096.

Thank you.

Best Regards,

Shu Pei | Admin

LKK Auto Consultants Pte Ltd

Phone: 6366-0055 | email: shupe@lkkauto.com | fax: 6741-4108

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)



Hsiao Tong (LKKAuto)

From: Hsiao Tong (LKKAuto)
Sent: Wednesday, 4 December 2019 9:17 AM
To: Jim Wong See Pah
Cc: Admin A
Subject: RE: Oref T1118/SH7877Z/jw, Yref CC3/EQ18020504/K1pb3

Without Prejudice

Dear Mr Jim,

We refer to the above matter.

Please be informed that EQ claim officer will take over the matter. Kindly liaise with EQ directly.

Email Address: eqiprs@eqinsurance.com.sg

Claim Officer: Jaime Tay

Fax Number: 65 6223 4190

Thank you.

Best Regards,

Hsiao Tong, Chew (Ms) | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6742-3197 | email: chewht@lkkauto.com | fax: 6741-4108

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Hsiao Tong (LKKAuto)
Sent: Wednesday, 27 November 2019 3:06 PM
To: Jim Wong See Pah <jimwong@cdge.com.sg>
Subject: RE: Oref T1118/SH7877Z/jw, Yref CC3/EQ18020504/K1pb3

Without Prejudice

Dear Sirs/Mdm,

We are pending instruction from EQ.

We will expedite and get back to you.

"Kindly note that this negotiation between parties on this matter is purely on a without prejudice basis with the sole intention of resolving the matter amicably without parties resorting to legal proceedings. No admission of liability, whatsoever, should be deemed / inferred from this negotiation of terms/settlement."

In the event of new evidence being discovered or subsequently produced by either party that will materially affect/influence on the issues of liability/damages, either party is not bound, thereafter, by the negotiation terms/settlement."

Best Regards,

Hsiao Tong, Chew (Ms) | Case Handler

LKK Auto Consultants Pte Ltd

Phone: 6742-3197 | email: chewht@lkkauto.com | fax: 6741-4108

Blk 51, Paya Ubi Industrial Park, Ubi Avenue 1, #02-25 | S(408933)

From: Jim Wong See Pah <jimwong@cdge.com.sg>
Sent: Wednesday, 27 November 2019 2:18 PM
To: Hsiao Tong (LKKAuto) <chewht@lkkauto.com>
Subject: Oref T1118/SH7877Z/jw, Yref CC3/EQ118020504/K1pb3

Dear Ms Chew

We refer the attached mail of 20.03.2019.

Please advise the status of our property damage claim.

Thank you.

Best Regards

Jim Wong

Claims Dept / ComfortDelgro Engineering Pte Ltd



Think Before Printing

This message and any attachments may contain confidential, privileged or proprietary information. If you are not the intended recipient, kindly notify us and delete this message and its attachments immediately, and please be advised that using, copying, distributing or disclosing any contents therein is not allowed. Statements pertaining to any matter outside our business are not to be taken as endorsed by ComfortDelGro Corporation Limited or its related companies. The comments/proposals provided are for discussion purposes only and are subject to approvals. Nothing herein shall constitute a binding agreement between the parties. Neither party shall be bound in any way to any term or condition except as agreed in a written agreement signed by the duly authorised representatives of both parties.

ComfortDelGro - a Green Office certified by the Singapore Environment Council - is committed to preserving the environment. We encourage you to print this only if necessary.

Our Ref : T 1118 / SH 7877Z /JW(st)
 Your ref : _____
 Date : 19-Nov-18

CDGE Taxi Claims Dept
 59 Loyang Drive 4th Flr
 Singapore 508969

ComfortDelGro Engineering Pte Ltd
 205 Braddell Road Singapore 579701

Mainline +65 6383 6280
 Facsimile +65 6280 9755

www.cdge.com.sg

Company Registration No: 199506049W

Workshops

Braddell
 205 Braddell Road
 Singapore 579701

Loyang
 59 Loyang Drive
 Singapore 508969

Sin Ming
 383 Sin Ming Drive
 Singapore 575717

Pandan
 45 Pandan Road
 Singapore 609286

Ubi
 320 Ubi Road 3
 Singapore 408649

Senoko
 24 Senoko Loop
 Singapore 758156

Sungei Kadut
 7 Sungei Kadut Way
 Singapore 728791

Yishun
 501 Yishun Industrial Park A
 Singapore 768732

EQ Insurance Company Limited
 5 Maxwell Road, MND Complex
 #17-00 Tower Block
 Singapore 069110

Attn : Motor Claims Department

WITHOUT PREJUDICE

Dear Sir

**ACCIDENT INVOLVING OUR TAXI SH 7877Z YOUR INSURED FBH5031L
 AND OTHER _____ ON 09.11.18**

We are the authorised repair workshop for Comfort Transportation Pte Ltd, the owner of motor Vehicle No : SH 7877Z which was involved in the captioned accident with your insured vehicle. The vehicle owner and the taxi driver concerned have requested and authorized us to assist them in presenting their claims against the party responsible for all applicable matters arising from the damage to the vehicle.

As the accident was caused by the negligent act of your insured driving FBH5031L we are submitting these claims for your consideration on behalf of the claimants.

TAXI OWNER'S CLAIM

1	Cost of Repair	\$ 2,439.73
2	<u>5</u> days Loss of Rental @ \$ <u>117.00</u> per day	\$ 585.00
3	Survey Report Fees (Surveyed by M/s LKK)	\$ -
4	LTA Search Fees	\$ 7.49
5	GIA / Police Report Fees	\$ -
6	Towing / Medical / Transportation Fees	\$ -
Sub Total :		\$ 3,032.22

HIRER'S CLAIM

7	<u>5</u> days Loss of Income @ \$ <u>80.00</u> per day	\$ 400.00
Total Claims:		\$ 3,432.22

We enclose herewith the following documents to support the claims: -

- a) Original repair bill and photocopies of photographs : 6 pcs.
- b) LTA search slip/s of : FBH5031L
- c) GIA / Police report/s of : SH 7877Z
- d) Letter of authority from owner / hirer / operator
 - () Witness statement/s () Towing/Medical bill/receipts () Certificate of Insurance
 - (X) Photograph/s of Accident Scene (x) Downtime/Mileage record (x) Rental Rate letter

Kindly look into the matter and let us hear from you on the settlement of the said claims as soon as possible.

Please note that it is a condition of any settlement reached that it shall be without prejudice to any personal injury claim (if any) of the taxi driver.

Yours faithfully

Jim Wong

CDGE Claims Department

Tel : 6214 8374 Fax: 6214 1843 Email : jimwong@cdge.com.sg

This is a computer generated letter. No signature is required.

Workshops

GST REG. NO. M2-8921817-3

TAX INVOICE

COMPANY REG. NO.: 199506048W
Page: 1

8010325

EQ INSURANCE COMPANY LIMITED

5 MAXWELL ROAD TOWER BLOCK #17-00
SINGAPORE SG 069110

CONTACT NO: 62239433

VEHICLE NO
SH 7877Z

MAKE
HYUNDAI

MODEL
I-40

DATE OF REG
20.12.2017

CHASSIS CODE
KMHLB41UMHU099367

INV. NO/DATE
91407860 15.11.2018

JOB NO.
305236888

ODOMETER READING

DATE/TIME IN
09.11.2018 12:15

Description : 3P 09.11.18

S/No Part No.

Qty Unit Price %Disc Net

PART REQUISITION

0001	04-01-0103-0593	FRT DOOR LH	1	2,256.40	20.00	1,805.12
0002	28-01-0103-0003	FRT DR COMFORTDELGRO LH	1	75.00	0.00	75.00
			SUB-TOTAL	:		1,880.12

JOB NATURE

0001	L	PANEL BEATING	200.00		200.00	
0002	23-502	SPRAYPAINT ON AFFECTED AREA	200.00		200.00	
			SUB-TOTAL	:		400.00

- WHILST TAKING ALL REASONABLE PRECAUTIONS AGAINST FIRE, THEFT OR ACCIDENTAL DAMAGE, THE COMPANY ACCEPTS NO RESPONSIBILITY FOR CAR, OR OTHER PROPERTIES BELONGING TO CUSTOMERS AND VEHICLES ARE DRIVEN AND TESTED AT OWNERS' RISK.
- CUSTOMERS SHALL INSPECT THEIR VEHICLES IMMEDIATELY UPON DELIVERY AND SHALL WITHIN 7 DAYS FROM SUCH DELIVERY ADVISE NOTICE IN WRITING TO THE COMPANY OF ANY COMPLAINTS. OTHERWISE, THE VEHICLES WILL BE DEEMED TO HAVE BEEN ACCEPTED IN GOOD ORDER.
- INTEREST OF 1% PER MONTH WILL BE CHARGED ON A DAY TO DAY BASIS IN RESPECT OF ANY AMOUNT DUE AND OWING TO THE COMPANY BY THE CUSTOMER AND NOT PAID ON THE DUE DATE OF PAYMENT (I.E. AFTER 30 DAYS FROM THE INVOICE) FOR THE PERIOD OF DEFAULT.
- PLEASE EXAMINE THIS INVOICE IMMEDIATELY UPON RECEIPT AND ADVISE THE COMPANY OF ANY ERRORS OR DISCREPANCIES WITHIN 14 DAYS OF RECEIPT. IF THE COMPANY DOES NOT HEAR FROM THE CUSTOMER, THE COMPANY WILL TREAT THIS INVOICE AS CORRECT AND BINDING.

ComfortDelGro Engineering Pte Ltd

A member of COMFORTDELGRO

Head Office:
205 Braddell Road
Singapore 579701

Kindly note that no receipt shall be issued unless requested.

CUSTOMER'S COPY

ACCOUNT No.	INVOICE No.	AMOUNT	BANK/CHQ No.
8010325	91407860	2,439.73	

Workshops

GST REG. NO. M2-8921817-3

TAX INVOICE

COMPANY REG. NO.: 199506048W
Page: 2

8010325

EQ INSURANCE COMPANY LIMITED

5 MAXWELL ROAD TOWER BLOCK #17-00
SINGAPORE SG 069110

CONTACT NO: 62239433

VEHICLE NO
SH 7877Z

MAKE
HYUNDAI

MODEL
I-40

DATE OF REG
20.12.2017

CHASSIS CODE
KMHLB41UMHU099367

INV. NO/DATE
91407860 15.11.2018

JOB NO.
305236888

ODOMETER READING

DATE/TIME IN
09.11.2018 12:15

Items total		2,280.12
Add GST @	7.000 %	159.61
Invoice amount		2,439.73

Issued by : CHEWBEELENG 15.11.2018 14:19:40
Repair type : CLSO/57/57
Payment Type/Term: /Credit 30 days

- WHILST TAKING ALL REASONABLE PRECAUTIONS AGAINST FIRE, THEFT OR ACCIDENTAL DAMAGE, THE COMPANY ACCEPTS NO RESPONSIBILITY FOR CARS OR OTHER PROPERTIES BELONGING TO CUSTOMERS AND VEHICLES ARE DRIVEN AND TESTED AT OWNERS' RISK.
- CUSTOMERS SHALL INSPECT THEIR VEHICLES IMMEDIATELY UPON DELIVERY AND SHALL WITHIN 7 DAYS FROM EACH DELIVERY GIVE NOTICE IN WRITING TO THE COMPANY OF ANY COMPLAINTS. OTHERWISE, THE VEHICLES WILL BE DEEMED TO HAVE BEEN ACCEPTED IN GOOD ORDER.
- INTEREST OF 1% PER MONTH WILL BE CHARGED ON A DAY TO DAY BASIS IN RESPECT OF ANY AMOUNT DUE AND OWING TO THE COMPANY BY THE CUSTOMER AND NOT PAID ON THE DUE DATE OF PAYMENT (I.E. AFTER 30 DAYS FROM THE INVOICE) FOR THE PERIOD OF DEFAULT.
- PLEASE EXAMINE THIS INVOICE IMMEDIATELY UPON RECEIPT AND ADVISE THE COMPANY OF ANY ERRORS OR DISCREPANCIES WITHIN 14 DAYS OF RECEIPT. IF THE COMPANY DOES NOT HEAR FROM THE CUSTOMER, THE COMPANY WILL TREAT THIS INVOICE AS CORRECT AND BINDING.

ComfortDelGro Engineering Pte Ltd

A member of COMFORTDELGRO

Head Office:
205 Braddell Road
Singapore 579701

Kindly note that no receipt shall be issued unless requested.

CUSTOMER'S COPY

ACCOUNT No.	INVOICE No.	AMOUNT	BANK/CHQ No.
8010325	91407860	2,439.73	

Our Ref: CT18110254

Date: 15 November 2018



TO WHOM IT MAY CONCERN

Dear Sir/Madam

ACCIDENT ON 09/11/2018 @ 09:10 hrs
ALONG PIE TWDS CHANGI AIRPORT B4 LORNIE EXIT
INVOLVING FBH5031L

We refer to the above-mentioned accident and wish to inform that **Comfort Transportation Pte Ltd** is the registered owner of the taxi bearing vehicle registration number **SH7877Z** (the "Taxi"). The Taxi was hired to **LEE YEOW KIANG (LI YAOQIANG) IC NO S7531782D** a registered hirer-operator of **Comfort Transportation Pte Ltd** at the time of occurrence of the aforementioned accident at a rental rate **\$117.00** per day (inclusive of GST).

Please be advised that the Taxi was insured with **MS First Capital Insurance Ltd** on a third party basis at the material time of the accident.

We wish to confirm that the aforesaid hirer-operator had obtained our permission to undertake repairs for damage on the Taxi arising from the said accident with a motor workshop of his choice.

Please liaise with the said hirer-operator or his authorized workshop directly for settlement of claims with third party's insurance company in respect of the said accident.

Yours faithfully

Christine Tay
Assistant Manager, Fleet Safety

This is a computer generated letter. No signature is required.

LETTER OF AUTHORISATION

(NAF / PAF)

**ACCIDENT INVOLVING
ALONG****I 40 SH7877Z , FBH5031L****ON 09-Nov-18 09:10****PIE TWDS CHANGI AIRPORT B 4 LORNIE EXIT.**

I / We

LEE YEOW KIANG (LI Y... (Hirer) NRIC No.: **S7531782D**

and/or

(Relief) NRIC No.:

Taxi Number

SH7877Z

hereby authorise ComfortDelGro Engineering Pte Ltd(CDGE):

1. To submit my/our claims for damages, costs and expense, including loss of income, loss of rental, medical fee and legal costs.
2. To have absolute discretion to agree to any settlement or compensation amount in respect of my/our claim against third party (except personal injuries and medical claims).
3. To sign Discharge Voucher on my/our behalf.
4. To accept any payment (claim proceeds) in respect of the claim against third party and payment by cheque shall be forward directly to CDGE in accordance with CDGE's instruction and made in favour of **"ComfortDelGro Engineering Pte Ltd"**.

Date

09-Nov-2018

Name of Hirer

LEE YEOW KIANG (LI YAOQIANG)

Hirer NRIC

S7531782D

Signature :



Address

**195E PUNGGOL ROAD #14-552
825195**

Contact No.

97472175

Enquire Vehicle Insurer

Vehicle No.	Incident Date/Time	Search Status	Insurance Company Code	Insurance Company Name
FBH5031L	09 Nov 2018 / 09:10:00	Successful	E04	EQ INSURANCE COMPANY LTD

Previous OK

SH78772



LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Affiliated to Federation Internationale Des Experts En Automobile

EQ INSURANCE COMPANY LTD

Ref : CC3/EQ118020504/K1pb3s2

5 MAXWELL ROAD
#17-00 TOWER BLOCK
MND COMPLEXSINGAPORE 069110

Date : 09-12-2019



Code : EQI

1. Policy Particulars :- THIRD PARTY CLAIM

Insured Veh.	FBH 5031L	Veh. Inspected	SH 7877Z
Policy No.	DMMFHQ18-000009	Coverage (\$)	0.00
Claim No.		Excess (\$)	0.00
Assign From		Assign Date	12/11/2018

2. Vehicle Particulars & Condition

Make & Model	HYUNDAI I40	c.c	1685
Engine No.	HIDDEN	Year of Reg.	2017
Chassis No.	KMHLB41UMHU099367	Colour	BLUE
Odometer	113450	Steering	IN ORDER
Brakes	IN ORDER	Modification	STANDARD ALLOY RIM
General	FAIR		

3. Conditions of Tyres

	Size	Make	Balance
R/H Front Tyre	205/60 R16	HANKOOK	7 mm
L/H Front Tyre	205/60 R16	HANKOOK	7 mm
R/H Rear Tyre	205/60 R16	HANKOOK	7 mm
L/H Rear Tyre	205/60 R16	HANKOOK	7 mm

4. Description of Damages

THE VEHICLE SUSTAINED DAMAGES AT THE N/S BODY.
DAMAGES SEE DETAILS.

5. General Information

Accident Date	09/11/2018	Inspection Date	12/11/2018
Survey held at	COMFORTDELGRO ENGINEERING PTE LTD 59 LOYANG DRIVE SINGAPORE 508969		

5a. Remarks

A)THE INSPECTION WAS CONDUCTED ON A"WITHOUT PREJUDICE" BASIS.
B)IN ACCORDANCE TO YOUR INSTRUCTIONS, WE HAVE NOT AUTHORISED REPAIRS.

5b. Estimate Days of Repair

ESTIMATED NORMAL PERIOD FOR REPAIR: **2 Working Days**



LKK Auto Consultants Pte Ltd

51 Ubi Ave 1 #01-25 Paya Ubi Industrial Park, Singapore 408933

TEL: 6256 3561 FAX: 6256 4315

Reg. No: 199607198R GST Reg. No. 19-9607198-R

Page No.:1 of 1

ADJUSTMENT ON REPAIR COST FOR VEHICLE NO. SH 7877Z

Qty	Description of Parts	Condition	Estimate By Workshop (\$)	Our Adjusted (\$)
	REPLACEMENT OF PARTS			
1	FRT DOOR LH	DENTED	2,256.40	2,256.40
	LESS 20% DISCOUNT		-451.28	-451.28
			1,805.12	1,805.12
	SPECIAL NETT ITEMS			
1	FRT DR COMFORTDELGRO LH (SN)	NECESSARY	75.00	75.00
			75.00	75.00
	LABOUR			
	PANEL BEATING.		220.00	200.00
	SPRAY PAINT ON AFFECTED AREA.		220.00	200.00
			440.00	400.00
	GRAND TOTAL		2,320.12	2,280.12
	RECOMMENDED COST OF REPAIRS			2,280.12

Report Ref No. CC3/EQ118020504/K1pb3s2

KALVIN ANG WEI KUN

Automotive Assessor / Investigator

HO LEONG CHUAN

Automotive Assessor

DISCLAIMER OF LIABILITY TO THIRD PARTIES:- This Report is made solely for the use and benefit of the Client named on the front page of this Report. No liability of responsibility whatsoever, in contract or tort, is accepted to any third party who may rely on the Report wholly or in part. Any third party acting or relying on this Report, in whole or in part, does so at his or her own risk.